PTO/SB/22 (11-07)
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	FOR EXTENSION OF TIME	) Docket Number (Option	Docket Number (Optional)		
FY 2008 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)				05986/100K435-US1	
Application Number 10/627,367-Conf. #2452				24, 2003	
For UNDERGOING MAGNETIC RESONANCE IMAGING  METHOD OF USING A MATCHED FILTER FOR DETECTING QRS COMPLEX FROM A PATIENT UNDERGOING MAGNETIC RESONANCE IMAGING					
Art Unit	3762		Examiner	A. M. Alter	
This is a req	uest under the provisions of 37	CFR 1.136(a) to extend the p	period for filing a reply in the	above identified	
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):					
		<u>Fee</u>	Small Entity Fee		
	One month (37 CFR 1.17(a)(	1)) \$120	\$60	\$	
	Two months (37 CFR 1.17(a)	(2)) \$460	\$230	\$	
x	Three months (37 CFR 1.17(	a)(3)) \$1050	\$525	\$ 525.00	
	Four months (37 CFR 1.17(a	)(4)) \$1640	\$820	\$	
	Five months (37 CFR 1.17(a)	(5)) \$2230	\$1115	\$	
X Applicant claims small entity status. See 37 CFR 1.27.					
X A check in the amount of the fee is enclosed.					
Payment by credit card. Form PTO-2038 is attached.					
The Director has already been authorized to charge fees in this application to a Deposit Account.					
The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to					
Deposit Account Number 04-0100 . I have enclosed a duplicate copy of this sheet.					
WARNING: Information on this form may become public. Credit card information should not be included on this form.  Provide credit card information and authorization on PTO-2038.					
I am the applicant/inventor.					
assignee of record of the entire interest. See 37 CFR 3.71.					
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).					
	x attorney or agent of	record. Registration Number	er <u>35,418</u>	_	
	attorney or agent und	der 37 CFR 1.34.			
		er if acting under 37 CFR 1.34		_	
( ) NIME ( ) Yound		December	4, 2007		
	Signatyre		Dat	Date	
	Pierre R. Yanney			(212) 527-7769	
Typed or printed name Telephone Number					
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.					
То	otal of for	rms are submitted.	12/07/2007 MBLANCO	00000024 10627367	
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